

11700

# Campaign Finance Disclosure Statement

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OCT 22 2010

## State of South Dakota

S.D. SEC. OF STATE

County, municipal and school candidates file in the office where you filed your nominating petition. Statewide PACs, political party, ballot question and other committees file statement with the Secretary of State's Office.

Mail to Secretary of State's Office, Election Department, 500 E Capitol Ave., Ste. 204, Pierre, SD 57501-5070  
Fax to 605-773-6580 or email to [kea.warne@state.sd.us](mailto:kea.warne@state.sd.us) **Fax and email images must contain the signature and the original must be filed in our office within one week following the date the fax/email was received.**

See pages 43-45 of the Guideline Book for specific instructions on completing this report.

Name of Committee American Cancer Society Cancer Action Network Smoke-free Committee

Complete Street and Postal Address 901 E St. NW, Suite 500, Washington, DC 20004

Name of Person Making Report Carter Steger

Daytime Phone Number 202-661-5727 Evening Phone Number 202-487-0624

Email Address csteger@cancer.org

If you are a candidate, what office are you seeking? \_\_\_\_\_

If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.

In support of Referred Law 12

Type of Campaign Statement Mid-year

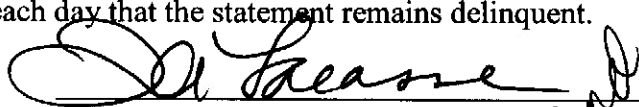
Pre-election (pre-primary, pre-general), year-end, mid-year (mid-year for ballot questions committees only), amendment, supplement or termination

***The following verification must be completed before submitting report.***

### VERIFICATION OF PERSON MAKING REPORT

I Lisa A. Lacasse (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer responsible for filing to a civil penalty of fifty dollars per day for each day that the statement remains delinquent.

Date: 10/19/10

  
Signature of Treasurer

Revised 7-1-09

**Filed this 22nd day of OCTOBER 2010**  
Chris Nelson  
SECRETARY OF STATE

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and enter this sum as unitemized contributions on the first line below. Any contribution of more than \$100 or aggregate during a calendar year from an individual and all contributions from political parties and PAC's must be entered as a separate item (itemized) giving the amount, name, residence address, city and state of the contributor. Any contribution from a federal political committee or political committee organized outside this state shall also include the name and internet website address of the filing office where the committee regularly files. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

\*\$

### Itemized Contributions from Individuals

[illegible]

\*\$ 0

[illegible]

### Schedule B - In Kind Contributions

Report all non-cash contributions of goods or services and the estimated fair market value. If the contribution is from a federal political committee or political committee organized outside this state list the name and internet website address of the filing office where the committee regularly files their campaign finance report.

[illegible]

Use this schedule to report any refunds, rebates, interest earned, sale of property, or other income which is not a direct contribution.

**Schedule D - Establishing and Administration of Committee/Solicitation Costs**  
List a categorical description and the estimated value of funds or donations by any organization to its political committee for establishing and administering the political committee or solicitation costs of the political committee.

[illegible]

## Schedule E – Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Categories have been provided for reporting common expenses. All other expenses should be listed. **All contributions to candidates and committees must be listed individually.**

[illegible]

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This schedule is to report all of the committee's obligations which are incurred but unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation. You must include the terms, interest rate and repayment schedule of each loan and the nature of each obligation.

<b>Total Debt Owed by Committee</b>	<b>0</b>
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This schedule is to report the amount of each loan owed to the political committee or political party. The amount of each loan made during the reporting period and the balance of each loan owed to the committee at the end of the reporting period must be itemized.

<b>Totals</b>			0
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### Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

1. Balance of cash and cash equivalents on hand, if any, at the beginning of the reporting period:	\$	0
2. Receipts		
Schedule A - Direct Contributions	\$	275,000
Schedule B - In-Kind Contributions	\$	
Schedule C - Other Income	\$	50,000
Schedule D - Establishing/Administration of Committee	\$	
Total of all Receipts	\$	
3. Total Monetary Receipts (A+C)	\$	325,000
4. Candidate's Personal Contribution to Own Campaign	\$	
5. Monetary Loans to Candidate or Committee During Reporting Period	\$	
6. Monetary Loans Repaid During Reporting Period	\$	
7. Expenditures - Schedule E	\$	
8. Debts & Obligations Owed by the Committee - Schedule F	\$	
9. Monetary Loans Made by the Committee During the Reporting Period - Schedule G	\$	
10. Monetary Loans Repaid to the Committee During the Reporting Period - Schedule G	\$	
11. Amount on hand at the close of this reporting period. This should equal lines (1+3+4+5+10) - (6+7+9)	*\$	325,000

**\*Note: You cannot end the reporting period with a negative balance.**

**County, municipal and school candidates file with the person in charge of the local election.**



**If you are a ballot question committee which received a contribution from an organization, please attach to this campaign finance disclosure statement, the Ballot Question Statement you received from the organization.**

**Ballot Question Contribution Statement**  
**State of South Dakota**

**RECEIVED**  
**OCT 22 2010**

**Complete one of the following three sections that pertain to your organization. S.D. SEC. OF STATE**

**Section 1**

☒ Check here if your organization is filed as a domestic or foreign entity in good standing with the Office of South Dakota Secretary of State.

Full Name of Organization: Delta Dental Plan of South Dakota

Date: 10/19/10 Signature: [Signature]

\*\*\*\*\*

**Section 2** N/A

State law requires any organization that makes a contribution to a ballot question committee that is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office, to include Section 2 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

State or Country under Whose Law the Organization is Incorporated or Organized: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

**Section 3** N/A

State law requires any organization that makes a contribution to a ballot question committee which is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office and is not eligible to complete section 2, must include Section 3 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

You must provide the names and street addresses of any owners, directors, or officers of the organization including the name and street address of the person authorizing the contribution.

Name of Organization's Owners, Directors or Officers	Street Address

Name of Person Authorizing the Contribution: \_\_\_\_\_

Street Address: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

N/A - DDSD gave \$10,000 and is a  
**Section 4** SD nonprofit - no voters

If any organization contributes more than ten thousand dollars in the aggregate to a ballot question committee the organization must submit with the contribution the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee

Name of Shareholder or Member	Street Address
N/A	

I hereby declare and affirm under penalty of perjury that the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee is included above and that no part of the contribution was raised or collected by the organization for the purpose of influencing the ballot questions.

Date: 10/19/10

President Signature: \_\_\_\_\_

Date: 10-19-10

Treasurer Signature: \_\_\_\_\_

State law requires you to submit this information to the treasurer of the committee you are making the contribution to.

Appendix E

**Ballot Question Contribution Statement  
State of South Dakota**

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**Complete one of the following three sections that pertain to your organization. S.D. SEC. OF STATE**

**Section 1**

☐ Check here if your organization is filed as a domestic or foreign entity in good standing with the Office of South Dakota Secretary of State.

Full Name of Organization: South Dakota State Medical Holding Co., Inc, dba DAKOTACARE\_\_\_\_\_

Date: 10/19/10\_\_\_\_\_ Signature: Neil J. Jenson\_\_\_\_\_

\*\*\*\*\*

**Section 2 N/A**

State law requires any organization that makes a contribution to a ballot question committee that is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office, to include Section 2 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

State or Country under Whose Law the Organization is Incorporated or Organized: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

**Section 3 N/A**

State law requires any organization that makes a contribution to a ballot question committee which is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office and is not eligible to complete section 2, must include Section 3 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

You must provide the names and street addresses of any owners, directors, or officers of the organization including the name and street address of the person authorizing the contribution.

Appendix E

Name of Organization's Owners, Directors or Officers	Street Address

Name of Person Authorizing the Contribution: \_\_\_\_\_

Street Address: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

**Section 4 N/A**

If any organization contributes more than ten thousand dollars in the aggregate to a ballot question committee the organization must submit with the contribution the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee

Name of Shareholder or Member	Street Address

I hereby declare and affirm under penalty of perjury that the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee is included above and that no part of the contribution was raised or collected by the organization for the purpose of influencing the ballot questions.

Date: 10/19/10 President Signature: Stephen H. GehringDate: 10/19/10 Treasurer Signature: Terance A. Nemece

State law requires you to submit this information to the treasurer of the committee you are making the contribution to.

Amended 6-2-09

RECEIVED

OCT 22 2010

S.D. SEC. OF STATES Appendix E

**Ballot Question Contribution Statement**  
**State of South Dakota**

**Complete one of the following three sections that pertain to your organization.**

**Section 1**



Check here if your organization is filed as a domestic or foreign entity in good standing with the Office of South Dakota Secretary of State.

Full Name of Organization: American Cancer Society, Inc.

Date: 10/20/2010 Signature: [Signature]

\*\*\*\*\*

**Section 2**

State law requires any organization that makes a contribution to a ballot question committee that is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office, to include Section 2 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

State or Country under Whose Law the Organization is Incorporated or Organized: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

**Section 3**

State law requires any organization that makes a contribution to a ballot question committee which is not filed as a domestic or foreign entity in good standing with the South Dakota Secretary of States Office and is not eligible to complete section 2, must include Section 3 of this informational statement with any contribution to a ballot question committee.

Full Name of Organization: \_\_\_\_\_

Street Address of the Organization's Principle Office: \_\_\_\_\_

You must provide the names and street addresses of any owners, directors, or officers of the organization including the name and street address of the person authorizing the contribution.

Name of Organization's Owners, Directors or Officers	Street Address

Name of Person Authorizing the Contribution: \_\_\_\_\_

Street Address: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*\*\*

#### Section 4

If any organization contributes more than ten thousand dollars in the aggregate to a ballot question committee the organization must submit with the contribution the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee

Name of Shareholder or Member	Street Address
ACS, South Atlantic Division	230 Williams Street, Suite 400, Atlanta, GA 30303

I hereby declare and affirm under penalty of perjury that the name and address of every person who owns ten percent or more of the organization, has provided ten percent or more of the organization's gross receipts, including capital contributions, in the current or preceding year, or has provided ten percent or more of the funds being contributed to the ballot question committee is included above and that no part of the contribution was raised or collected by the organization for the purpose of influencing the ballot questions.

Date: 10/20/2010 Chief Executive Officer Jah O. Webb  
 President Signature: \_\_\_\_\_

Date: 10/20/2010 Chief Financial Officer John E. Webb  
 Treasurer Signature: \_\_\_\_\_

State law requires you to submit this information to the treasurer of the committee you are making the contribution to.

Amended 6-2-09